# **Folk Arts Project Program**

## FY2006 Final Report

Deadline: 30 days after the completion of the grant period

1.	Grant Number:		Fisc	al Year	: 20	006	
2.	Grantee's Name						
3.	Mailing Address						
4.	City		5. 5	State		6. Zip+4	
7.	County		8.	FEIN#	<u>!</u>		
9.	Phone Number		10.	Fax Nu	ımber		
11.	Email Address						
12.	12. Contact Person for this report						
13.	Phone Number		14.	Fax Nu	ımber		
15.	Email Address						
16.	Activity Dates	Begin:			End:		
17.	Number of Individu	uals who Benefited fron	n this	grant	Youth		Adult
18.	18. Dollar amount spent on Arts Education \$						
19.	Number of Artists	who Participated in	this a	activity			
20.	What counties do	you serve?					
21.	21. What other states do you serve? (if applicable)						
22.	22. KAC dollars awarded for this activity leveraged \$			dollars fro	om other sources		
23. List other sources:							

As you reach the conclusion of your Folk Arts Project Grant funding period for FY2006, please respond to the following self-assessment questions on a maximum of two pages, placing your organization's name in the top right hand corner of the page.

### 1. Impact/Evidence

Describe the impact this project had on the community and provide supporting evidence (Note: Evidence may include materials created, survey results, participant comments, observation, bibliographies, publications, quantitative participation data, etc.)

Grantee _	
	Folk Arts Project Final Report

- How did the activity help educate the community about the cultural traditions being presented?
- How was the represented folk group involved in the planning and interpretation of their cultural tradition?
- How did the cultural experts who were involved with this activity enhance the project?
- What new groups or audiences were reached through this activity?

#### 2. Credit

How did you satisfy the Kentucky Arts Council credit requirement? If applicable, attach copies of programs, advertisements, newsletters, web site links, etc., containing the KAC credit line.

### **Grant Activity Financial Report**

Please attach a complete report of the activity income and expenses (one-page maximum), using the following format. Do not include in-kind contributions and expenses, although you may describe these in a budget note. If the actual figures differ substantially from the original budget, please explain in budget notes.

Income	Original Budget	Actual
Kentucky Arts Council Folk Arts Project Grant		(grant amount)
Matching Funds (list each major source)		
Total Income		

Expenses	Original Budget	Actual
List each line item from the budget in your application.		
Total Expenses		

Net / (Deficit)	

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Grantee	
	Folk Arts Project Final Report
Mailing Address for Final Report	
Kentucky Arts Council	
Capital Plaza Tower	
500 Mero Street, 21 <sup>st</sup> floor	
Frankfort, KY 40601-1987	
502-564-3757	
Toll Free: 888-833-2787	
certify that I am legally authorized to submit this report of ioregoing statements and enclosures are true and complesignatures must be in RED ink.	
Preparer's Signature	Date
All signatures must be in RED	ink.
Гуре Name	Title

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